

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>D.B.</i>	<i>2020000-A-00</i>	
O.I.P.E. CLASSIFIER		<i>109-21-00</i>	
FORMALITY REVIEW	<i>NH</i>	<i>017</i>	<i>10-17-00</i>
RESPONSE FORMALITY REVIEW	<i>HA</i>	<i>858</i>	<i>03-22-01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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